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SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (96-03)

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HEADLINE: CNO Speaks Out on TRICARE

CNO Washington (NSMN) -- "TRICARE has the potential to solve the biggest concern military people have about their health care -- lack of access."

That's the message ADM Mike Boorda, Chief of Naval Operations, delivered to more than 1,000 military health care leaders 22 January during a national conference designed to implement the new military health care program throughout the country. Boorda spoke at the conference, held in Washington, DC, as the keynote speaker at the invitation of Dr. Stephen Joseph, the Assistant Secretary of Defense for Health Affairs.

TRICARE is the Department of Defense's managed care program that joins the military and private sector's health care delivery systems to better serve military members, families and retirees. The program began in March 1995 and will be implemented nationwide by May 1997.

The CNO's enthusiasm for the program came through loud and clear. "The biggest complaint I hear about our medical care system is access. TRICARE has the potential to solve this problem, if we let it and if we require that it do so."

Boorda also asked the group to realize the importance of medical care in the overall quality of life of military people and their families. "Our people are the only thing that counts; not bureaucracies in Washington, not health care administrators, not even the doctors and nurses, but the people -- the people and their families. That's what we exist for and that's what this conference is about."

Health care access for military retirees was also one of the themes the CNO discussed. He related retiree access to current

military readiness. "How we deal with military retired people is going to be watched and thought about by today's military people. We need to get a 'fix' for TRICARE that allows retirees, including those over 65 years of age, to get access to the health care they expected when they joined the military."

Boorda concluded his remarks by asking the attendees to "think of people as people. TRICARE is an administrative system that has the chance to succeed. But if that is all it is, if it's administered by people who understand the rules and follow them blindly and don't care or love their customers, it will fail. Please, make it a success. Our Navy and our military depend on you."

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HEADLINE: Telemedicine Comes to Naval Hospital Corpus Christi
NAVHOSP Corpus Christi, TX (NSMN) -- On 17 January 1996, Naval Hospital Corpus Christi, in a pilot project with Wilford Hall U.S. Air Force Medical Center, became the first military medical treatment facility in Texas (TRICARE Region VI) to go "on line" with the latest technology in telemedicine. The ability now exists for patients and referring physicians at Naval Hospital Corpus Christi to interact "live" with specialists at Wilford Hall in San Antonio.

Telemedicine uses an interactive video system integrated with biomedical telemetry. Integrated into the video system are a number of diagnostic devices, such as an electronic stethoscope that, in conjunction with real-time digital transmission of an EKG and echocardiogram, permits a cardiologist to do a complete cardiological examination.

The new telemedicine system offers benefits to both patients and staff alike. HM3 Bryan Schmidt used to spend his day scheduling patients for a specialty referral in San Antonio. If successful, the patient had to drive two and a half hours (one way) for a fifteen minute appointment. "It saves a lot of time and now life is easier for everyone," said Schmidt. "I just walk across the hall with the patient and send the consult via the telemedicine system."

The first patient who used the system was heard exclaiming, "This is wonderful. I dreaded taking that long drive with my 20-month-old daughter!"

CDR Dagmara Bastiks, MC, one of Naval Hospital Corpus Christi's surgeons, was attending training on the telemedicine system and remembered that one of her patients, for whom she had been trying to get a gastroenterology appointment in San Antonio, might be an excellent test case for the system. During the training session, the patient's endoscopy photos and history were transmitted to Wilford Hall, allowing the gastroenterologist to participate in the planning for the patient's subsequent care.

"I was impressed with the ability to transmit pictures and images," said Bastiks. "Pictures are worth a thousand words when discussing a patient. I see great potential with the use of telemedicine."

Story by HMC K.T. Holland, Naval Hospital Corpus Christi

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HEADLINE: Reengineering Hospital Admission Uses '90s Technology
BUMED Washington (NSMN) -- Email, the Internet and telemedicine are all signs we are moving closer to becoming a paperless society. Hospitals evolving into a paperless workplace have also instituted automated systems. The evolution of health care reform has led to searching for new ways of doing business and improving customer satisfaction.

One way of breaking through to new levels of efficiency using today's modern technology is using the Composite Health Care System (CHCS). Instead of asking patients to sign in by hand using the old green log books of the past, patients are now logged into a computer and linked to CHCS. CHCS is the information system tying together all aspects of medical treatment and administration at Navy hospitals. CHCS allows doctors to admit patients, access medical records, and even order a blood test or an X-ray right from their own desk using the computer.

Asking patients to sign in a log book and then logging them into CHCS defeats the purpose, wasting time and resources. By logging the patient's information directly into CHCS, Navy hospitals extend added privacy to the patient. The computerized entry eliminates personal information being written in the log book such as the patient's name, social security number and medical concerns. With the green log book, anyone who signs in can look at the information written previously in the log book. Getting rid of the old green log books not only protects patient privacy, but it may save a few trees and even make for a greener Navy.

Story by Ms. Ann Kirby, Bureau of Medicine and Surgery

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HEADLINE: Naval Hospital Decreases Pharmacy Waiting Time

NAVHOSP Camp Pendleton, CA (NSMN) -- Next to being stuck in gridlock on the freeway, standing in line is one of the most frustrating experiences anyone must tolerate. To make life better for patients waiting in line to fill their prescriptions, the pharmacy at Naval Hospital Camp Pendleton recently started a newer, faster way of doing business.

With over 39,000 new and refill prescriptions each month, keeping pharmacy customers happy was a monumental challenge, especially when waiting times averaged about 45 minutes.

Realizing the problem, Naval Hospital Camp Pendleton aggressively tackled the process of filling prescriptions by creating a one-stop, personalized service at the initial prescription entry site. Since October of last year, a team of two to three personnel, including a pharmacist, fill written prescriptions as they are presented at the window. High volume medications are currently stocked right at the input site, which facilitates quick dispensing. Prescription input, filling and checking is done while patients are at the window, where the pharmacist can counsel them on important dose, food-drug interaction and side effects of their medication.

With the new one-stop, bank-teller style operation,

prescription processing times are now averaging less than three minutes. Patients are much happier; already more than 250 positive written comments have been received by the hospital indicating how pleased customers are with the new system.
Story by HM2 Jack Kovic, Naval Hospital Camp Pendleton

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HEADLINE: After 36 Years, Miss Lady Retires into History Books
NAVHOSP Pensacola, FL (NSMN) -- Naval Hospital Pensacola's been around 170 years ... but Mrs. Ola Lee Watson wasn't among the original cast in this long-running medical history play in northwest Florida. However, Watson -- also, known as "Miss Lady" to nursing staffers of the Intensive Care Unit -- took her own place in history as she retired earlier this month after more than 36 years of federal service at the Naval Hospital.

Watson was one of 19 African-American women who were among the first Practical Nurse class from Washington Vocational School to study nursing, in 1956, at the Naval Hospital. Their mentor, Ms. Katharine Goldsmith (RN), was in attendance at the retirement ceremony for her student. Looking back, Goldsmith said one "must remember this was the 1950s. It took great courage for the hospital Commanding Officer Captain Joseph Land and Congressman Bob Sikes to establish this program ... when others had no room for us. We're all indebted to them."

After graduating from the LPN training in 1957, Watson -- who was Miss Ola Lee Simmons at the time -- began work at Baptist Hospital. She returned to the Naval Hospital on 5 May 1959. "I'm overwhelmed ... and excited," said Watson about the ceremony and retirement. But after 36-plus years, she's decided to devote additional time to her family and husband, Walter.

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HEADLINE: HM/DT are NTC Great Lakes' Junior and Senior SOQs
BUMED Washington (NSMN) -- Congratulations to HM3 Christopher McIntosh and DT1 W.J. McFarland, who were selected as Fourth Quarter 1995 Junior and Senior Sailors of the Quarter, respectively, for Naval Training Center Great Lakes. With so many outstanding Sailors assigned to the area's commands, it is quite an accomplishment for Navy medicine to "sweep" the competition. McIntosh is assigned to Naval Hospital Great Lakes. McFarland is with Naval Dental Center Great Lakes. They are currently under consideration for selection as NTC Great Lakes' Sailor of the Year.

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HEADLINE: CNO Announces BOOST/ECP Selectees
CNO Washington (NSMN) -- Two recent NAVADMINs from the Chief of Naval Operations announced Sailors selected for Broadened Opportunity for Officer Selection and Training (BOOST) and for the Enlisted Commissioning Program.

Among those selected were several Navy Medical Department personnel. Congratulations to BOOST selectees HN A.O. Akinloba, HN E.E. Conner, HN D.L. Davis, HM3 A. Gilbert, HN E.R. Hill, DN E.J. Jackson, HN A.P. Knight, HN H.M. Lima, HM3 E.D. Perez, HN

S.L. Peters and HN W.J. Torres. If any vacancies occur, HA D.P. Caviness, HA G.P. Ray and HN J.D. Slabaugh are on the alternates list.

Congratulations also to the corpsmen selected for the Nurse Corps BOOST program: HN J.S. Almonroeder, HA J.E. Fitzgerald, HN J.D. Hacinas, HN D.J. McIntire, HN R.F. Rojas, HN L.T. Selles, HA T.A. Shramek and HA D.N. Toczykowski.

CNO congratulated the BOOST selectees in NAVADMIN 009/96 of 17 January, writing that "Their past performance and accomplishments have earned them the opportunity to complete baccalaureate degree requirements as full-time students and to obtain commissions in the Navy following successful completion" of the program. The same opportunity awaits those selected for the Enlisted Commissioning Program (ECP).

Congratulations to HM3 J.B. Hiers and HM2 M.S. Wright, who were selected as primaries for the Basic ECP; to DT3 R.A. McGregor, who was selected as a primary for the FY96 ECP (Aviation Option); and to HM2 M.J. Line, who was selected as an alternate for the Basic ECP. In NAVADMIN 010/96 of 19 January, CNO praised selectees' qualifications and congratulated them "for this significant personal milestone."

(NOTE TO EDITORS: DT=Dental Technician; HM=Hospital Corpsman; DN=Dentalman; HN=Hospitalman; HA=Hospitalman Apprentice.)

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HEADLINE: Twentynine Palms Article Selected For DOD Home Page
NAVHOSP Twentynine Palms, CA (NSMN) -- An article titled "A Resourcing Decision Model for Military Hospitals" was recently selected for inclusion on the Assistant Secretary of Defense for Health Affairs' Home Page on the Internet's World Wide Web.

The article, written by Naval Hospital Twentynine Palms' Executive Officer CAPT Steven E. Hart, MC, is a study on making decisions for military hospitals in today's environment of managed care.

The URL address to access the article on the OASD(HA) Home Page is: <http://www.ha.osd.mil/main/hartdoc.html>.

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HEADLINE: Navy Pediatricians Elected to Office in the AAP
NMC Portsmouth, VA (NSMN) -- CAPT Julian Keith, MC, Chairman of the Pediatrics Department at Naval Medical Center Portsmouth has been elected to a second two-year term as Chairman of the Uniformed Services Section of the American Academy of pediatrics (AAP).

CDR Wendy Bailey, MC, staff pediatrician at Naval Medical Center Portsmouth, has been elected to the Executive Committee of the Uniformed Services Section of the AAP. Bailey is also the editor of the AAP's Uniformed Services Section Journal.

The Uniformed Services Section of the AAP consists of more than 600 active and Reserve military pediatricians.

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HEADLINE: Naval Hospitals Take Top Honors For Retention Programs
USNH Rota, Spain (NSMN) -- On 27 December 1995, ADM Leighton

Smith, Commander in Chief, U.S. Naval Forces, Europe, announced the winners of the Golden and Silver Anchors for the best retention programs in European Navy Commands. U.S. Naval Hospital Naples, Italy, was awarded the Golden Anchor and U.S. Naval Hospital Rota was awarded the Silver Anchor as winners in the medium size category. It was the first time in recent memory that hospitals have swept an award category.

The CINCUSNAVEUR Golden and Silver Anchor program is open to all units belonging to Commander, Fleet Air Mediterranean (COMFAIRMED); Commander, Sixth Fleet (COMSIXTHFLT); Commander, U.S. Naval Activities, United Kingdom (COMNAVACTUK); and Personnel Support Activity (PSA) Europe. Award categories are: Large (over three hundred personnel assigned), Medium (one hundred to three hundred personnel assigned), and Small (less than one hundred personnel assigned). The CINCUSNAVEUR evaluation board looks at retention, family programs, career information and quality of life in determining the winners.

In a message congratulating all the winners, RADM John Ryan, COMFAIRMED, said "creating a command climate that promotes an environment conducive to professional development while taking care of our Sailors and their families' needs is extremely important.... Congratulations to all hands on a job well done. Congratulations to your command career counselors and career information teams for their concerted efforts."

Story by HMCN Mark Cook, U.S. Naval Hospital Rota

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SIDEBAR: CINCLANTFLT Golden Anchor Award Winners Listed

CINCLANTFLT Norfolk, VA (NSMN) -- The Golden Anchor Awards for Commander in Chief, Atlantic Fleet, which include a Medical Command category, were recently announced. Congratulations to CINCLANTFLT Medical Command Golden Anchor Award winner Branch Medical Clinic Norfolk, VA, and runner-up Naval Hospital Charleston, SC.

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HEADLINE: Improved Health Care for Joint Endeavor Reservists

DOD Washington (NSMN) -- DOD recently announced a demonstration project which will waive the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) annual deductible for family members of National Guard and Reserve personnel called to active duty for 31 days or more in support of Operation Joint Endeavor in Bosnia.

Additionally, in those areas where TRICARE is in full operation, National Guard and Reserve personnel called to active duty for 179 days or more will have the option of enrolling their families in TRICARE Prime.

Under the terms of the demonstration, Reserve members activated for Operation Joint Endeavor will not be required to pay a deductible and CHAMPUS will immediately begin cost sharing for family members.

"This pilot program is consistent with DOD's intent to take better care of reserve families," said Ms. Deborah R. Lee, Assistant Secretary of Defense for Reserve Affairs.

The Defense Enrollment Eligibility Reporting System (DEERS), used by CHAMPUS to determine eligibility for benefits, will be updated with information on which Reserve members have been activated. Should Reservists or their family members need to have CHAMPUS claims processed before DEERS has been updated, they should call the DEERS Support Office at 1 800 538-9552.

In cooperation with the Bureau of Naval Personnel, the Bureau of Medicine and Surgery is sending letters to all Navy Reservists being recalled for active duty in Bosnia, explaining these benefits and how to use them. Navy Reservists needing clarification or information unavailable through their chain of command should contact BUMED's CAPT Dave Dundon, MSC, at DSN 762-3660 or commercial (202) 762-3660.

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HEADLINE: HEALTHWATCH: Fat and Your Hearth

NNMC Bethesda, MD (NSMN) -- Coronary artery disease (CAD) is the leading cause of death in the United States. Our diet alone plays a major role in the development of CAD. The American Heart Association recommends that we consume no more than 30 percent of our daily calories from fat.

However, the American diet consists of greater than 37 percent fat. What can we do to trim this excess fat from our diet? A good start is to learn the fat content of the common foods that we consume on a daily basis. Another way is to follow the tips listed below:

Ten Easy Ways to Reduce the Fat in Your Diet

- Switch from whole milk to skim or 1 percent.
- Use mustard and ketchup instead of mayonnaise.
- Eat no more than three egg yolks a week.
- When dining out, avoid menu items with names such as sauteed, fried, smothered, battered and au gratin.
- Eat hot air popcorn instead of microwave brands, and pretzels instead of potato chips.
- Choose lean meats, trimming excess visible fat and removing skin from poultry.
- Avoid foods with more than five grams of fat per serving.
- Bake, broil, grill and steam food, as opposed to frying.
- Use fat-free salad dressings, which can reduce fat intake by as much as 18 grams of fat per serving.
- Eat non-fat yogurt instead of ice cream.

It's never too early or too late to begin reducing the fat content in our diets. February is American Heart Month, so now's a good time to start developing a healthy heart by reducing your fat intake. But remember, you can always discover nutrition -- anytime, anywhere.

Story by LTjg David P. Bourque, MSC, Registered Dietitian, National Naval Medical Center Bethesda Food Management Department

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